



## Pre Breeding Exam Information

Please fill out the following form to the best of your ability and present to our staff at your mare's pre breeding exam.

1. Owner of Mare: \_\_\_\_\_
2. Owner's Phone: \_\_\_\_\_
3. Owner's Current Address: \_\_\_\_\_
4. Mare's Registered Name: \_\_\_\_\_
5. Mare's Registration Number: \_\_\_\_\_
6. Age: \_\_\_\_\_ Color: \_\_\_\_\_
7. Previous Foals: \_\_\_\_\_
8. Last Seen Showing Heat: \_\_\_\_\_
9. Previous Additional Reproductive History:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Mare's Current Vaccine Status: \_\_\_\_\_
11. Date of Last Dental Float: \_\_\_\_\_
  
12. Stallion's Registered Name: \_\_\_\_\_
13. Stallion's Registration Number: \_\_\_\_\_
14. Stallion's Location(City, State): \_\_\_\_\_
15. Contact Name for Collections: \_\_\_\_\_
16. Contact Phone Numbers: \_\_\_\_\_
17. Collection Days and Availability: \_\_\_\_\_
18. Mode of Shipments Available: \_\_\_Air \_\_\_Fed Ex Ground \_\_\_Local